DEPARTMENT POLICY

MA Only

This is an SSI-related Group 1 MA category.

MA is available to former SSI recipients who receive RSDI benefits and would now be eligible for SSI if RSDI cost-of-living increases paid since SSI eligibility ended were excluded. The reason for SSI ineligibility does **not** matter.

All eligibility factors must be met in the calendar month being tested. If the month being tested is an L/H month and eligibility exists, go to BEM 546 to determine the post-eligibility patient-pay amount.

503 individuals eligible for Medicare are covered by the Buy-In Program (see BAM 810) and are considered eligible for QMB (BEM 165).

Nationally, this MA category is referred to as Medicaid under the Pickle Amendment.

NONFINANCIAL ELIGIBILITY FACTORS

- The person must:
 - Currently receive RSDI benefits, and
 - Have stopped receiving SSI benefits after April 1977, and
 - Have been entitled to RSDI benefits in the last month he was eligible for and received SSI.

Note: RSDI benefits paid retroactively can be considered. An SSI recipient who receives retroactive RSDI benefits does **not** become retroactively ineligible for SSI even when the retroactive RSDI monthly benefit was more than his SSI benefit.

- The person must be:
 - Age 65 or older (BEM 240), or
 - Blind (BEM 260), or
 - •• Disabled (BEM 260).
- The MA eligibility factors in the following items must be met:

- •• BEM 220, Residence.
- •• BEM 221, Identity.
- BEM 223, Social Security Numbers.
- •• BEM 225, Citizenship/Alien Status.
- •• BEM 255, Child Support.
- •• BEM 256, Spousal/Parental Support.
- BEM 257, Third Party Resource Liability.
- BEM 265, Institutional Status.
- •• BEM 270, Pursuit of Benefits.

Note: An ex parte reivew (see glossary) is required before Medicaid closures when there is an actual or anticipated change, unless the change would result in closure due to ineligibility for all Medicaid. When possible, an ex parte review should begin at least 90 days before the anticipated change is expected to result in case closure. The review includes consideration of all MA categories. See BAM 115 and 220.

FINANCIAL ELIGIBILITY FACTORS

Groups

Use fiscal and asset group policies for SSI-related groups in BEM 211.

Assets

Countable assets **cannot** exceed the asset limit in BEM 400. Countable assets are determined based on the MA policies in BEM 400, 401 and 402.

Divestment

Policy in BEM 405 applies.

Income Eligibility

Income eligibility exists when net income does **not** exceed the special protected income level in RFT 245. Income eligibility **cannot** be established with a patient-pay amount or by meeting a deductible.

Determine countable income according to MA policies in BEM 500 and BEM 530, except as explained in "503 COUNTABLE RSDI" below. Apply the deductions in BEM 540 (for children) or BEM 541 (for adults) to countable income to determine net income.

503 COUNTABLE RSDI

Bridges does this calculation. Enter current RSDI in Bridges.

RSDI cost-of-living allowances are called COLAs. For all persons whose income is considered, do **not** count COLAs received since the 503 individual's last month of concurrent RSDI/SSI.

Exception: If the client objects to the amount used, request a COLA history from the SSA district office. Send a DHS-3471, DHS/SSA Referral to the SSA district office with the following request:

 Client objects to our determination of Medicaid eligibility under the Pickle Amendment. Please supply each amount of Title II COLA paid since * .

*Enter month and year of the last concurrent RSDI/SSI benefit.

If a fiscal group contains more than one potential 503 individual and their last month of concurrent RSDI/SSI differs, do separate budgets for each 503 individual.

VERIFICATION REQUIREMENTS

Verify current RSDI. Verify the last month of concurrent RSDI entitlement and SSI eligibility and receipt. BENDEX has such information.

The verification requirements for all other eligibility factors are specified in the appropriate manual items.

LEGAL BASE

MA

42 CFR 435.135

Deficit Reduction Act (2005), Social Security Act 1903(x) PL 109-171.

JOINT POLICY DEVELOPMENT

Medicaid, Adult Medical Program (AMP) also known as Adult Benefit Waiver (ABW), Transitional Medical Assistance (TMA/TMA-Plus), and Maternity Outpatient Medical Services (MOMS) policy has been developed jointly by the Department of Community Health (DCH) and the Department of Human Services (DHS).